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For calendar year 2014, or tax year beginning 01-01-2014

Department of the Treasury

Internal Revenue Service

#### DLN: 93491210004015

OMB No 1545-0052

Open to Public

## **Return of Private Foundation** or Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter social security numbers on this form as it may be made public. ► Information about Form 990-PF and its instructions is at <a href="https://www.irs.gov/form990pf">www.irs.gov/form990pf</a>.

Inspection

, and ending 12-31-2014

A Employer identification number Name of foundation IACOCCA FAMILY FOUNDATION 38-6071154 **B** Telephone number (see instructions) Number and street (or P O box number if mail is not delivered to street address) 867 BOYLSTON STREET 6TH FLOOR (617) 267-7747 C If exemption application is pending, check here City or town, state or province, country, and ZIP or foreign postal code BOSTON, MA 02116 G Check all that apply Initial return Initial return of a former public charity **D 1.** Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% Address change Name change test, check here and attach computation E If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation J Accounting method Cash 🗸 Accrual **F** If the foundation is in a 60-month termination I Fair market value of all assets at end **▶** □ under section 507(b)(1)(B), check here of year (from Part II, col. (c), Other (specify) line 16)►\$ 39,924,966 (Part I, column (d) must be on cash basis.) Part I Analysis of Revenue and Expenses (The (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see for charitable expenses per books (cash basis only) Contributions, gifts, grants, etc , received (attach 125.705 Check ► ☐ If the foundation is **not** required to attach . . . . . . . . . . . . . . Interest on savings and temporary cash investments 1,109,097 Dividends and interest from securities. . . 1,109,097 Gross rents . . . . . . . . . . . . Net rental income or (loss)\_ 1,570,409 Revenue Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 7,416,359 Capital gain net income (from Part IV, line 2) . 1.570.409 Net short-term capital gain . . Income modifications . . 10a Gross sales less returns and allowances Less Cost of goods sold . . . Gross profit or (loss) (attach schedule) . . . . Other income (attach schedule) 11 Total. Add lines 1 through 11 . . 2,805,211 2.679.506 12 367,445 13 Compensation of officers, directors, trustees, etc 408,272 40,827 20,685 20,685 0 14 Other employee salaries and wages . . Operating and Administrative Expenses 11.471 0 11.471 15 Pension plans, employee benefits . . 93 10.058 10.058 Legal fees (attach schedule). . . . . 16a 匆 39.391 30.443 Accounting fees (attach schedule). 8.948 图 20,822 224 20,598 Other professional fees (attach schedule) **17** 囫 46.798 2,058 19,740 Taxes (attach schedule) (see instructions) 11.334 19 Depreciation (attach schedule) and depletion . 79.890 7.989 71,901 20 Travel, conferences, and meetings. 19,999 0 19,999 21 533 53 480 22 Printing and publications . . . . Other expenses (attach schedule) . . . 9 104,215 7,044 75,838 Total operating and administrative expenses. 24 Add lines 13 through 23 . . . . . 773,468 67,143 648.658 25 Contributions, gifts, grants paid. . . . 848,709 916,209 26 Total expenses and disbursements. Add lines 24 and 1,622,177 67,143 1,564,867 25 27 Subtract line 26 from line 12 1.183.034 Excess of revenue over expenses and disbursements 2,612,363 Net investment income (if negative, enter -0-) Adjusted net income (If negative, enter -0-)

פפ	rt II	Ralance Sheets Attached schedules and amounts in the description column	Beginning of year			f year
-		Balance Sheets  Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	<b>(b)</b> Book		(c) Fair Market Value
	1	Cash—non-interest-bearing	787,058		223,971	223,971
	2	Savings and temporary cash investments				
	3	Accounts receivable 246,827				
		Less allowance for doubtful accounts 🟲	316,821		246,827	246,827
	4	Pledges receivable 🟲				
		Less allowance for doubtful accounts 🕨				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule) 🟲				
		Less allowance for doubtful accounts 🟲				
٢	8	Inventories for sale or use				
sets	9	Prepaid expenses and deferred charges	4,565		4,457	4,457
Яδ	10a	Investments—U S $$ and state government obligations (attach schedule)				
	b	Investments—corporate stock (attach schedule)	855,051	<b>%</b>	837,203	837,203
	С	Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment basis 🟲				
		Less accumulated depreciation (attach schedule) 🟲				
	12	Investments—mortgage loans				
	13	Investments—other (attach schedule)	35,758,951	<b>%</b> 3	36,539,973	36,539,973
	14	Land, buildings, and equipment basis ▶				
		Less accumulated depreciation (attach schedule) <b>&gt;</b> 51,843	22,917	<b>%</b> 3	21,058	21,058
	15	Other assets (describe 🟲)	1,996,508	<b>%</b>	2,051,477	2,051,477
	16	Total assets (to be completed by all filers—see the				
		ınstructions Also, see page 1, item I)	39,741,871	3	39,924,966	39,924,966
	17	Accounts payable and accrued expenses	9,506		7,394	
	18	Grants payable	1,210,000		1,032,500	
ě	19	Deferred revenue				
abilities	20	Loans from officers, directors, trustees, and other disqualified persons				
36	21	Mortgages and other notes payable (attach schedule)				
_	22	Other liabilities (describe 🛌)				
	23	Total liabilities (add lines 17 through 22)	1,219,506		1,039,894	
		Foundations that follow SFAS 117, check here 🕨 🔽				
or Fund Balances		and complete lines 24 through 26 and lines 30 and 31.				
and	24	Unrestricted	38,522,365	3	38,885,072	
88	25	Temporarily restricted				
Ξ	26	Permanently restricted				
Ξī		Foundations that do not follow SFAS 117, check here 🕨 🦵				
×		and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds				
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund				
	29	Retained earnings, accumulated income, endowment, or other funds				
Net	30	Total net assets or fund balances (see instructions)	38,522,365	3	38,885,072	
_	31	Total liabilities and net assets/fund balances (see instructions)	39,741,871	3	39,924,966	
Pa	rt II	Analysis of Changes in Net Assets or Fund Balances		I		
1		Total net assets or fund balances at beginning of year—Part II, column	(a), line 30 (must a	gree		
				_	1	38,522,365
2		Enter amount from Part I, line 27a			2	1,183,034
3		Other increases not included in line 2 (itemize)			3	0
4		Add lines 1, 2, and 3			4	39,705,399
5		Decreases not included in line 2 (itemize)		959	5	820,327
6		Total net assets or fund balances at end of year (line 4 minus line 5)—		ine 30 .	6	38,885,072

the Part VI instructions

		kınd(s) of property sold (e g , re e, or common stock, 200 shs M		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1 a	VARIOUS				2014-01-01	2014-12-31
b	VARIOUS				2014-01-01	2014-12-31
d						
e						
		(f) Depreciation allowed	d (a) Cost	or other basis	(h) Gain	or (loss)
(€	e) Gross sales price	(or allowable)		pense of sale		) minus (g)
а	2,030,	344		2,031,48	8	-1,144
b	5,386,6	015		3,814,46	2	1,571,553
С						
d						
е .						
Co	mplete only for assets sho	wing gain in column (h) and owne	d by the foundation	n on 12/31/69	(I) Gains (Col	(h) gain minus
(i) F M V as of 12/31/69		(j) Adjusted basis as of 12/31/69	(k) Exc	ess of col (1)	col (k), but not	less than -0-) <b>or</b> om col (h))
a				377 11 2117	,	-1,144
						1,571,553
						, ,
d						
<u>u</u>						
		r	If gain, also enter	ın Dart I lına 7 i		
2	Capital gain net income	or (net capital loss)	If (loss), enter -0-	ın Part I, line 7	2	1,570,409
3	Net short-term capital g	aın or (loss) as defined in sectior	ns 1222(5) and (6)			
	If gain, also enter in Part in Part I, line 8	t I, line 8, column (c) (see instru	ctions) If(loss), e	nter - 0 -	3	
Part	V Qualification Und	der Section 4940(e) for R	educed Tax or	Net Investme	nt Income	
		ate foundations subject to the se				
(FOI OPI	lional use by domestic priva	ate loulidations subject to the se	ction 4940(a) tax	on het investment	ilicollie )	
Ifsection	on 4940(d)(2) applies, leav	ve this part blank				
		ection 4942 tax on the distributa Jualify under section 4940(e) Do			eriod?	┌ Yes ┌ No
<b>1</b> E n	ter the appropriate amount	ın each column for each year, se	ee instructions befo	ore making any ent	ries	
	(a)	. ,			(d)	
Base	period years Calendar	(b) Adjusted qualifying distributions	(c) Net value of noncha	rıtable-use assets	Distributio	n ratio
year (	or tax year beginning in) 2013				(col (b) divided	
	2013	2,984,875 3,804,607		36,989,272		0 080696
	2012	3,746,410		37,496,244		0 099914
	2010	2,307,911		38,020,563		0 060702
	2009	3,092,540		33,983,247		0 091002
	Total of line 1, column (c				2	0 436800
3	A verage distribution rati	o for the 5-year base period—div foundation has been in existence			3	0 087360
4		ncharitable-use assets for 2014	· · · · · · · · · · · · · · · · · · ·		4	39,207,703
5			·	<u> </u>	5	3,425,185
6		ent income (1% of Part I, line 27		_	6	26,124
7				· · · · · ·	7	
		tions from Part XII, line 4				3,451,309
8		ester then line 7. shock the box		<u> </u>	8 northugung a 104 tax	1,574,342

	990-PF (2014)  Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the inst	ructio		age <b>4</b>
		Tuctio	115)	
1a	on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary-see ; instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		5	2,247
	here ► Tand enter 1% of Part I, line 27b			
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0
3	Add lines 1 and 2		5	2,247
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)  4			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		5 2	2,247
6	Credits/Payments			
a	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 47,276			
b	Exempt foreign organizations—tax withheld at source 6b			
С	Tax paid with application for extension of time to file (Form 8868) 6c 25,000			
d	Backup withholding erroneously withheld 6d			
7	Total credits and payments Add lines 6a through 6d		7	2,276
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here 🔽 If Form 2220 is attached. 8			62
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10		19	9,967
11	Enter the amount of line 10 to be Credited to 2015 estimated tax 19,967 Refunded 11			0
	t VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did		Yes	No
_	It participate or intervene in any political campaign?	. 1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions			
	for definition)?	1b		No
	published or distributed by the foundation in connection with the activities.			
c	Did the foundation file Form 1120-POL for this year?	1c		No
d	Enter the amount (If any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation $\blacktriangleright$ \$0 (2) On foundation managers $\blacktriangleright$ \$0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers 🕨 \$0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	. 2		No
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	. 3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	. 5		No
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either  • By language in the governing instrument, or	   		l
	By state legislation that effectively amends the governing instrument so that no mandatory directions			
	that conflict with the state law remain in the governing instrument?	. 6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV.	. 7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	-		
	MA, MI			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney	_,	\ V-	
_	General (or designate) of each state as required by General Instruction G? If "No," attach explanation.	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)			
	or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)?			NI-
10	If "Yes," complete Part XIV	9	$\vdash \vdash \vdash$	No
10	and addresses.	. 10		No

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had			
	advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ►IACOCCAFOUNDATION ORG			
14	The books are in care of ►THE FOUNDATION Telephone no ►(617)	267-	7747	
	Located at ▶867 BOYLSTON STREET 6TH FLOOR BOSTON MA ZIP+4 ▶02116			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here			<u> </u>
13	and enter the amount of tax-exempt interest received or accrued during the year			,
	<u> </u>		l	
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over	مد ا	Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country			
Pai	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required		\ <b>v</b>	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes V No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  Yes V No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?    Yes No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) A gree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period			
_	after termination of government service, if terminating within 90 days ) Yes V No			
Ь	If any answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations	16		No
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		No
_	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,	1.		Na
_	that were not corrected before the first day of the tax year beginning in 2014?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014?			
	If "Yes," list the years > 20, 20, 20			
ь	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
,	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to <b>all</b> years listed, answer "No" and attach statement—see instructions )	2b		
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			
	► 20			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
Ju	any time during the year?			
h	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation			
-	or disqualified persons after May 26, 1969, <b>(2)</b> the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or <b>(3)</b>			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
	If the foundation had excess business holdings in 2014.).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
-	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		No

Pa	rt VII-B Sta	tements Rega	rdir	ng Activities for	Wh	ich Form 4720	May	Be Required (cont	inued	')	1 age O
5a	During the year	did the foundation	n pay	or incur any amoun	t to						
	(1) Carry on pro	paganda, or othe	rwise	attempt to influenc	e leg	ıslatıon (section 49	45(e	:)) <sup>?</sup>	√ No		
	(2) Influence th	e outcome of any	spec	ıfıc publıc election (	see	section 4955), or to	car	ry			
	on, directly	or indirectly, any	voter	registration drive?.				<b>┌</b> Yes <b>┌</b>	√ No		
	(3) Provide a gi	ant to an individu	al for	travel, study, or oth	ners	ımılar purposes?		☐ Yes Ϝ	√ No		
	(4) Provide a gi	ant to an organiza	ition	other than a charita	ble,	etc , organization de	scrib	ped			
	ın section 4	945(d)(4)(A)? (s	ee ins	structions)				<b>┌</b> Yes <b>┌</b>	√ No		
	(5) Provide for	any purpose other	than	religious, charitabl	e, sc	ientific, literary, or					
	educational	purposes, or for t	he pr	evention of cruelty t	to ch	ıldren or anımals?.		Yes 🔽	√ No		
b	If any answer is	"Yes" to 5a(1)-(	5), d	ıd <b>any</b> of the transad	tion	s fail to qualify unde	r the	exceptions described in			
	Regulations sec	tion 53 4945 or i	nac	urrent notice regard	ling c	lısaster assıstance	(see	instructions)?		5b	
	O rganizations r	elyıng on a curren	t not	ice regarding disast	eras	sistance check her	e	▶↑	- [		
С				4), does the foundat							
								T Yes [	- <sub>No</sub>		
				y Regulations section							
6a				ceive any funds, dire			prer	niums on			
									√ No		
ь	•							benefit contract?		6b	No
	If "Yes" to 6b, fi			,	•	., .			ŀ		-
7a	•		vas tl	ne foundation a party	v to a	nrohibited tax shel	lter ti	ransaction? <b>TYes F</b>	- No		
								the transaction?		7b	
								n Managers, Highly			ovees
Pa		Contractors			-,	ustees, i suitae			· u.u	р.	, , , ,
1	List all officers,	directors, trustee	s, foı	ındation managers a	nd t	heir compensation (	see i	nstructions).			
				Title, and average		c) Compensation		(d) Contributions to	(e) E:	xpense	account,
	(a) Name and	daddress	1	hours per week evoted to position	(1	(f not paid, enter -0-)		mployee benefit plans I deferred compensation			wances
See	Addıtıonal Data T	ahle		.voccu to position		• ,	una	deterred compensation			
	Additional Data 1	чыс	1								
			┨								
					_				-		
			-								
_2_	Compensation of	five highest-paid	emp	loyees (other than	thos	e included on line 1-	-see	instructions). If none, er	nter "N	ONE."	
<b>/</b>	<b>.</b> N			(b) Title, and aver	age			(d) Contributions to	(-) [		
(a		ss of each emplo nan \$50,000	/ee	hours per week		(c) Compensation	on	employee benefit plans and deferred	1	•	account, wances
	<b>F</b>	····· + · · / · · · /		devoted to positi	on			compensation			
NON	1E										
				1							
									-		
								<u> </u>			
Tota	ı <b>I</b> number of other	employees paid o	vers	\$50,000					1		0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)						
3 Five highest-paid independent contractors for professional serv	ices (see instructions). If none, enter "NONE".					
(a) Name and address of each person paid more than \$50,000	<b>(b)</b> Type of service	(c) Compensation				
NONE						
<b>Total</b> number of others receiving over \$50,000 for professional servi	ces	0				
Part IX-A Summary of Direct Charitable Activities						
List the foundation's four largest direct chantable activities during the tax year. Inclu	do relevant statistical information such as the number of					
organizations and other beneficiaries served, conferences convened, research paper		Expenses				
1						
2						
3						
4						
Part IX-B Summary of Program-Related Investmen						
Describe the two largest program-related investments made by the foundation d	luring the tax year on lines 1 and 2	A mount				
1						
2						
All other program-related investments See instructions						
3						
Total. Add lines 1 through 3		0				

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations. see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc. 1 purposes 1a 35.723.722 1h 1.282.749 1c 2.798.304 1d 39.804.775 Reduction claimed for blockage or other factors reported on lines 1a and 1e 2 2 3 3 Subtract line 2 from line 1d. 39.804.775 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see 4 597.072 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4. 5 39.207.703 5 1,960,385 **Distributable Amount** (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and Part XT certain foreign organizations check here  $\blacktriangleright \Gamma$  and do not complete this part.) 1 1.960.385 Tax on investment income for 2014 from Part VI, line 5. . . . . . 52.247 2a Income tax for 2014 (This does not include the tax from Part VI). . . Add lines 2a and 2b. 52.247 2c 3 3 1.908.138 4 4 5 5 1.908.138 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . 7 1.908.138 Part XIII Oualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 1 Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . . . . . . . . . . 1a 1.564.867 1b 0 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc. 2 2 9,475 3 Amounts set aside for specific charitable projects that satisfy the За. 3b 4 1,574,342 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment Adjusted qualifying distributions. Subtract line 5 from line 4. . . . . . . . . . . . 1,574,342 Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

the section 4940(e) reduction of tax in those years

	Olidisti ibuted Tilcollie (see ilisti)	actions)			
		<b>(a)</b> Corpus	(b) Years prior to 2013	<b>(c)</b> 2013	( <b>d)</b> 2014
1	Distributable amount for 2014 from Part XI, line 7	Corpus	rears prior to 2013	2013	1,908,138
	Undistributed income, if any, as of the end of 2014				1,500,200
	Enter amount for 2013 only			0	
	· · · · · · · · · · · · · · · · · · ·		0		
	Total for prior years 20, 20, 20				
	Excess distributions carryover, if any, to 2014 From 2009 1,404,788				
	From 2010				
	From 2011				
	From 2012				
	From 2013				
	Total of lines 3a through e	6,743,344			
	Qualifying distributions for 2014 from Part				
•	XII, line 4 🕨 \$1,574,342				
а	Applied to 2013, but not more than line 2a			0	
	Applied to undistributed income of prior years		0		
_	(Election required—see instructions).				
c	Treated as distributions out of corpus (Election	0			
	required—see instructions)				
d	Applied to 2014 distributable amount				1,574,342
е	Remaining amount distributed out of corpus	0			
5	Excess distributions carryover applied to 2014	333,796			333,796
	(If an amount appears in column (d), the				
	same amount must be shown in column (a).)				
6	Enter the net total of each column as				
_	indicated below:	6,409,548			
	Corpus Add lines 3f, 4c, and 4e Subtract line 5	0,409,340			
b	Prior years' undistributed income Subtract line 4b from line 2b		0		
c	Enter the amount of prior years' undistributed				
·	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed		U		
d	Subtract line 6c from line 6b Taxable amount				
	—see instructions		Ŭ		
е	Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount—see				
	Instructions			0	
f	Undistributed income for 2014 Subtract				
	lines 4d and 5 from line 1 This amount must				_
	be distributed in 2015				0
7	Amounts treated as distributions out of				
	corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may				
	be required - see instructions)	0			
8	Excess distributions carryover from 2009 not				
	applied on line 5 or line 7 (see instructions)	1,070,992			
9	Excess distributions carryover to 2015.	F 222 ===			
	Subtract lines 7 and 8 from line 6a	5,338,556			
	Analysis of line 9				
	Excess from 2010				
	Excess from 2011 1,889,298				
	Excess from 2012 2,013,079				
	Excess from 2013 1,009,283				
е	Excess from 2014		l l		I

P	art XIV Private Operating Foun	ndations (see in	istructions and P	art VII-A, questic	on 9)	
3	If the foundation has received a ruling or de	etermination letter	that it is a private	operating		
	foundation, and the ruling is effective for 20	014, enter the date	of the ruling	▶∟_		
)	Check box to indicate whether the organiza	ation is a private or	perating foundation	n described in sectio	on <b>「</b> 4942(1)(3) c	or <b>Г</b> 4942(j)(5)
	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
	income from Part I or the minimum	(a) 2014	<b>(b)</b> 2013	<del>-</del>	(d) 2011	(e) Total
	investment return from Part X for each	(a) 2014	( <b>b)</b> 2013	(c) 2012	(a) 2011	
	year listed					
	85% of line 2a					
:	Qualifying distributions from Part XII, line 4 for each year listed					
	Amounts included in line 2c not used					
•	directly for active conduct of exempt					
	activities					
è	Qualifying distributions made directly					
	for active conduct of exempt activities					
	Subtract line 2d from line 2c					
	Complete 3a, b, or c for the alternative test relied upon					
1	"Assets" alternative test—enter					
	(1) Value of all assets					
	(2) Value of assets qualifying			1		
	under section 4942(j)(3)(B)(i)			<u> </u>		
,	"Endowment" alternative test— enter 2/3					
	of minimum investment return shown in					
	Part X, line 6 for each year listed			1		
:	"Support" alternative test—enter					
	(1) Total support other than gross investment income (interest,					
	dividends, rents, payments					
	on securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt organizations as provided in					
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support					
	from an exempt organization					
	(4) Gross investment income					
3	rt XV Supplementary Informatio			the organization	on had \$5,000 o	or more in
	assets at any time during		instructions.)			
	<b>Information Regarding Foundation Manage</b> List any managers of the foundation who ha		re than 2% of the t	total contributions r	eceived by the four	dation
•	before the close of any tax year (but only if					aacion
	, , , , ,	•		, , ,	. , , , ,	
	LEE A IACOCCA					
)	List any managers of the foundation who ov	vn 10% or more of	the stock of a corp	oration (or an equal	ly large portion of t	he
	ownership of a partnership or other entity)	of which the founda	ation has a 10% or	greater interest		
_	Total and the Demonstration Contribution Con	Ciff I Calcala				
	Information Regarding Contribution, Grant					
	Check here F If the foundation only make	ces contributions to	o preselected char	itable organizations	and does not acce	pt
	unsolicited requests for funds If the founds		grants, etc (see in	structions) to indivi	duals or organization	ons under
_	other conditions, complete items 2a, b, c, a	апи и				
a	The name, address, and telephone number	or e-mail address	of the person to w	hom applications sh	ould be addressed	
	KATHRYN IACOCCA HENTZ					
	867 BOYLSTON STREET 6TH FLOOR BOSTON, MA 02116					
	(617) 267-7747					
h	The form in which applications should be s	uhmitted and infor	mation and materia	als they should incli	ıde	
	GRANT APPLICATION AT WWW IACOCO			ars they should litelt	iue	
_		CAFOUNDATION	0 10			
С	Any submission deadlines					
_	FEBRUARY 1					
ı	Any restrictions or limitations on awards,	such as by geograp	phical areas, charit	table fields, kinds of	institutions, or oth	er
	factors	EC DECE 4 5 5 =	NELATER A ===::==	T. I. C.		
	DRIMARILY CONCERNED WITH DIARET	ES RESEARCH - D	ZELATED ACTIVIT	LIES		

Form 990-PF (2014)				Page <b>11</b>
Part XV Supplementary Inform				
3 Grants and Contributions Paid		proved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year See Additional Data Table				
Total	<u> </u>	<u> </u>	▶ 3a	916,209
<b>b</b> Approved for future payment				
BETTY FORD CENTER 72301 COUNTRY CLUB DRIVE RANCHO MIRAGE,CA 92270		PC	UNRESTRICTED GRANT	30,000
MASSACHUSETTS GENERAL HOSPITAL 165 CAMBRIDGE STREET BOSTON,MA 02114		PC	RESTRICTED GRANT	1,000,000
NATIVITY PREPARATORY SCHOOL 39 LAMARTINE STREET JAMAICA PLAIN,MA 02130		PC	UNRESTRICTED GRANT	2,500
Total				1,032,500

Form 990-F						Page <b>12</b>
	-A Analysis of Income-Produci			T		
Enter gross	s amounts unless otherwise indicated	(a)	usiness income (b)	Excluded by section (c)	1 512, 513, or 514 ( <b>d)</b>	<b>(e)</b> Related or exempt function income
_	n service revenue	Business code	A mount	Exclusion code	A mount	(See instructions)
·						
e						
	and contracts from government agencies					
<ul><li>2 Membe</li><li>3 Interes</li></ul>	rship dues and assessments st on savings and temporary cash ments					
	nds and interest from securities			14	1,109,097	
	ital income or (loss) from real estate					
	ebt-financed property ntal income or (loss) from personal					
	ty					
	nvestment income					
invento	ory			18	1,570,409	
	ome or (loss) from special events profit or (loss) from sales of inventory					
<b>11</b> Otherr	evenue <b>a</b>					
	al Add columns (b), (d), and (e).			) )	2,679,506	0
	Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify c			1	13	2,679,506
	-B Relationship of Activities to	the Accom				
Line No.	Explain below how each activity for which the accomplishment of the foundation's instructions )					

Form 990		•										Pa	ge <b>1</b> 3
Part X	VII	Information Re Noncharitable					sactio	ns and I	Relationships	With			
		anızatıon dırectly or ıı 1 (c) of the Code (othe	ndırectly e	engage	ın any of	the following w						Yes	No
organı	ızatıo	ns?											
<b>a</b> Trans	fers f	rom the reporting four	idation to	a nonc	harıtable	exempt organı	zation of	f					
											1a(1)		No
(2) 0	ther	assets									1a(2)		No
<b>b</b> Other	trans	actions											
		of assets to a noncha											No
		ises of assets from a											No
		of facilities, equipme											No
		ursement arrangemen									1b(4)		No
		or loan guarantees.									1b(5)		No
` `		nance of services or m		-	_						1b(6)		No
		acılıtıes, equipment, i									1c		No
of the In any	good trans	er to any of the above s, other assets, or se saction or sharing arm	rvices giv	en by t	he report	ing foundation	If the fo	undation r	eceived less tha	n fair marke	et value		
(a) Line No		(b) Amount involved	(c) Name	of nonch	narıtable ex	empt organization	(d)	<b>)</b> Description	of transfers, transac	tions, and sha	arıng arra	ngemer	nts
	-												
	_												
							+						
							+						
descri	ıbed ı	dation directly or indiin n section 501(c) of the omplete the following s (a) Name of organization	ne Code (d schedule		an sectio		rın sect			• • • • • ption of relati		es <b>F</b>	No
1	the be	r penalties of perjury, est of my knowledge a nation of which prepar	nd belief,	ıt ıs tru	ie, correc					an taxpaye	r) is bas	sed on	
Here	*:	****				2015-07-1	5	*****		return	IRS disc		
	Sı	gnature of officer or t	rustee			Date	<u> </u>	Title		below	preparei		
	F	Print/Type preparer's THOMAS WASHBU CPA		Prepa	rer's Sıgr	nature	Date 201	5-07-15	Check if self- employed ▶	PTIN P(	005373	319	
Paid Prepar Use		Firm's name ► ALEXANDER ARONS	ON FINNI	ING & (	CO PC				Firm's EIN ► 0	4-257178	0		
Only	- 1	Firm's address F  21 EAST MAIN STREET WESTBORO, MA 01581 Phone no (508) 366-910							00				

# Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances	
LEE A IACOCCA	CHAIRMAN	0	0	0	
867 BOYLSTON STREET 6TH FLOOR BOSTON,MA 02116	1 00				
KATHRYN IACOCCA HENTZ	PRESIDENT	165,250	38,979	0	
867 BOYLSTON STREET 6TH FLOOR BOSTON,MA 02116	25 00				
LOUIS LATAIF	SECRETARY /	0	0	0	
867 BOYLSTON STREET 6TH FLOOR BOSTON,MA 02116	TREASURER 1 00				
KENNETH ANDERSON	TRUSTEE	0	0	0	
867 BOYLSTON STREET 6TH FLOOR BOSTON,MA 02116	1 00				
LIA IACOCCA ASSAD	TRUSTEE	0	0	0	
867 BOYLSTON STREET 6TH FLOOR BOSTON,MA 02116	1 00				
SCOTT BLAIR	TRUSTEE	0	0	0	
867 BOYLSTON STREET 6TH FLOOR BOSTON,MA 02116	1 00				
EDWARD BOUSA	TRUSTEE	0	0	0	
867 BOYLSTON STREET 6TH FLOOR BOSTON,MA 02116	1 00				
JOHN GERACE	TRUSTEE	0	0	0	
867 BOYLSTON STREET 6TH FLOOR BOSTON,MA 02116	1 00				
DESMOND HEATHWOOD	TRUSTEE	0	0	0	
867 BOYLSTON STREET 6TH FLOOR BOSTON,MA 02116	1 00				
MARGARET LAURENCE	EXECUTIVE	182,688	21,355	0	
867 BOYLSTON STREET 6TH FLOOR BOSTON,MA 02116	DIRECTOR 40 00				

Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
	or substantial contributor			
a Paid during the year				
ALZHEIMER'S ASSOCIATION 17771 COWAN IRVINE,CA 92614		PC	RESTRICTED GRANT	10,000
AMERICAN COLLEGE OF ENDOCRINOLOGY 245 RIVERSIDE AVENUE SUITE 200 JACKSONVILLE,FL 32202		PC	UNRESTRICTED GRANT	1,900
AMERICAN IRELAND FUND 211 CONGRESS STREET BOSTON,MA 02110		PC	UNRESTRICTED GRANT	6,625
ARCHDIOCESE OF BOSTON 66 BROOKS DRIVE BRAINTREE,MA 02184		PC	RESTRICTED GRANT	5,000
ARCHDIOCESE OF BOSTON 66 BROOKS DRIVE BRAINTREE,MA 02184		PC	RESTRICTED GRANT	5,000
BETH ISRAEL DEACONESS HOSPITAL - NEEDHAM OFFICE OF DEVELOPMENT NEEDHAM,MA 02492		SO1	UNRESTRICTED GRANT	1,000
BOSTON RESCUE MISSION PO BOX 849100 BOSTON,MA 022849100		PC	RESTRICTED GRANT	1,000
BREWSTER ACADEMY 80 ACADEMY DRIVE WOLFEBORO,NH 03894		PC	UNRESTRICTED GRANT	25,000
BROADCASTERS FDN OF AMERICA 125 WEST 55TH STREET NEW YORK,NY 10019		PF	RESTRICTED GRANT	2,550
CANYON CLUB INC 20456 LAGUNA CANYON ROAD LAGUNA BEACH,CA 92651		PC	UNRESTRICTED GRANT	2,500
CANYON CLUB INC 20456 LAGUNA CANYON ROAD LAGUNA BEACH,CA 92651		PC	UNRESTRICTED GRANT	2,500
CANYON CLUB INC 20456 LAGUNA CANYON ROAD LAGUNA BEACH,CA 92651		PC	UNRESTRICTED GRANT	2,500
CARE HOUSE OF OAKLAND COUNTY 410 WHIPPERS IN COURT BLOOMFIELD HILLS,MI 48302		PC	RESTRICTED GRANT	5,000
CAROLINA HEALTHCARE FNDN CAROLINA HEALTHCARE FOUNDATION CHARLOTTE,NC 28232		PC	RESTRICTED GRANT	2,000
CATHOLIC CHARITIES OF LOS ANGELES 211 THIRD AVENUE VENICE,CA 90291		PC	UNRESTRICTED GRANT	4,620
Total				916,209

Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
CLERGY HEALTH AND RETIREMENT TRUST ARCHDIOCESE OF BOSTON BROOKS DRIVE, MA 02184		PC	UNRESTRICTED GRANT	2,000
COMMUNITY SERVICE PROGRAMS INC ROSE SHIRAZI SANTA ANA,CA 92705		PC	RESTRICTED GRANT	1,500
COMO PARK ZOO & CONSERVATORY 1225 ESTABROOK DRIVE ST PAUL, MN 55103		PC	UNRESTRICTED GRANT	1,000
DENISON UNIVERSITY PO BOX 716 GRANVILLE,OH 430239989		PC	UNRESTRICTED GRANT	1,000
DENISON UNIVERSITY PO BOX 716 GRANVILLE,OH 430239989		PC	UNRESTRICTED GRANT	1,000
EARICLES 1505 MANZANITA LANE MANHATTAN BEACH,CA 90266		PC	UNRESTRICTED GRANT	2,500
FREEDOM INSTITUTE 515 MADISON AVE NEWYORK,NY 10022		PC	UNRESTRICTED GRANT	1,000
GROTON SCHOOL 282 FARMERS ROW GROTON,MA 01450		PC	RESTRICTED GRANT	5,000
HAND IN PAW 2598 STARCREST DRIVE DUARTE,CA 91010		PC	UNRESTRICTED GRANT	2,500
HOAG HOSPITAL FOUNDATION 500 SUPERIOR AVENUE NEWPORT BEACH,CA 92663		PC	RESTRICTED GRANT	1,500
JSERRA CATHOLIC HIGH SCHOOL 26351 JUNIPERO SERRA RD SAN JUAN CAPISTRANO,CA 92675		PC	RESTRICTED GRANT	6,000
JSERRA CATHOLIC HIGH SCHOOL 26351 JUNIPERO SERRA RD SAN JUAN CAPISTRANO,CA 92675		PC	RESTRICTED GRANT	2,500
JSERRA CATHOLIC HIGH SCHOOL 26351 JUNIPERO SERRA RD SAN JUAN CAPISTRANO, CA 92675		PC	RESTRICTED GRANT	6,000
JSERRA CATHOLIC HIGH SCHOOL 26351 JUNIPERO SERRA RD SAN JUAN CAPISTRANO, CA 92675		PC	RESTRICTED GRANT	7,000
JSERRA CATHOLIC HIGH SCHOOL 26351 JUNIPERO SERRA RD SAN JUAN CAPISTRANO, CA 92675		PC	RESTRICTED GRANT	5,000

Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
JSERRA CATHOLIC HIGH SCHOOL 26351 JUNIPERO SERRA RD SAN JUAN CAPISTRANO, CA 92675		PC	RESTRICTED GRANT	1,500
JSERRA CATHOLIC HIGH SCHOOL 26351 JUNIPERO SERRA RD SAN JUAN CAPISTRANO, CA 92675		PC	RESTRICTED GRANT	1,500
JSERRA CATHOLIC HIGH SCHOOL 26351 JUNIPERO SERRA RD SAN JUAN CAPISTRANO, CA 92675		PC	UNRESTRICTED GRANT	10,000
JSERRA CATHOLIC HIGH SCHOOL 26351 JUNIPERO SERRA RD SAN JUAN CAPISTRANO, CA 92675		PC	UNRESTRICTED GRANT	13,000
KEEP MEMORY ALIVE 888 W BONNEVILLE AVENUE LAS VEGAS, NV 89106		PC	RESTRICTED GRANT	12,800
KEEP MEMORY ALIVE 888 W BONNEVILLE AVENUE LAS VEGAS, NV 89106		PC	RESTRICTED GRANT	10,000
LA COUNTY POLICE CANINE ASSOCIATION 1223 WILSHIRE BLVD SANTA MONICA, CA 90403		PC	UNRESTRICTED GRANT	1,000
LAGUNA NIGUEL MILITARY SUPPORT FUND BRUD LETOURNEAU LAGUNA NIGUEL,CA 92677		PC	RESTRICTED GRANT	500
LAGUNA NIGUEL MILITARY SUPPORT FUND BRUD LETOURNEAU LAGUNA NIGUEL,CA 92677		PC	UNRESTRICTED GRANT	1,000
LEHIGH UNIVERISTY GLOBAL VILLAGE 111 RESEARCH DRIVE IACOCCA HALL BETHLEHEM,PA 18015		PC	RESTRICTED GRANT	20,985
LEHIGH UNIVERISTY GLOBAL VILLAGE 111 RESEARCH DRIVE IACOCCA HALL BETHLEHEM,PA 18015		PC	RESTRICTED GRANT	3,450
MAKE A WISH ALABAMA ATTN BRANDYN DUPREE TUSCALOOSA,AL 35402		PC	UNRESTRICTED GRANT	1,000
MAKE A WISH ALABAMA ATTN BRANDYN DUPREE TUSCALOOSA,AL 35402		PC	UNRESTRICTED GRANT	500
MANNA PROJECT INTERNATIONAL LORI SCHARFFENBERG WARREN NASHVILLE,TN 37212		PC	RESTRICTED GRANT	30,000
MARIAN HIGH SCHOOL 7225 LAHSER ROAD BLOOMFIELD HILLS,MI 48301		PC	UNRESTRICTED GRANT	1,000
Total				916,209

Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	Тестріспе		
a Paid during the year				
MIDDLEBURY COLLEGE COLLEGE ADVANCE MENT MIDDLEBURY,VT 05753		PC	RESTRICTED GRANT	25,000
NANTUCKET COTTAGE HOSPITAL FOUNDATION 57 PROSPECT STREET NANTUCKET, MA 025542799		PC	RESTRICTED GRANT	13,250
NATIONAL STUTTERING ASSOCIATION 119 W 40TH STREET NEW YORK,NY 10018		PC	UNRESTRICTED GRANT	2,500
OBLATES OF THE VIRGIN MARY SEMINARIAN FUN ST CLEMENT EUCHARISTIC SHRINE BOSTON,MA 02215		PC	UNRESTRICTED GRANT	1,000
PARENTS AGAINST LEUKEMIA 14609 DEERVALE PLACE SHERMAN OAKS,CA 91403		PC	UNRESTRICTED GRANT	5,000
PEPPERDINE UNIVERSITY 24255 PACIFIC COAST HIGHWAY MALIBU,CA 902634898		PC	UNRESTRICTED GRANT	2,500
PROMISES FOUNDATION PO BOX 662087 LOS ANGELES, CA 90066		PF	UNRESTRICTED GRANT	10,000
PROVIDENCE TARZANA MEDICAL CENTER 18321 CLARK STREET TARZANA,CA 91356		PC	RESTRICTED GRANT	1,000
SAINT MARY PARISH 133 SCHOOL STREET WALTHAM,MA 02451		PC	UNRESTRICTED GRANT	5,000
SAN GABRIEL JR GOLF INC PO BOX 1675 DUARTE,CA 90019		PC	UNRESTRICTED GRANT	5,000
SECOND HARVEST FOOD BANK OF ORANGE COUNTY 8014 MARINE WAY IRVINE, CA 92618		PC	UNRESTRICTED GRANT	1,000
SHARE SPACE FOUNDATION C/O CALLAS CARLSON LOS ANGELES, CA 90025		PC	RESTRICTED GRANT	5,000
ST BARTHOLOMEW PARISH 1180 GREENDALE AVENUE NEEDHAM,MA 02492		PC	RESTRICTED GRANT	400
ST BARTHOLOMEW PARISH 1180 GREENDALE AVENUE NEEDHAM,MA 02492		PC	RESTRICTED GRANT	36,082
ST BARTHOLOMEW PARISH 1180 GREENDALE AVENUE NEEDHAM,MA 02492		PC	UNRESTRICTED GRANT	200
Total				916,209

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
<b>a</b> Paid during the year				
ST CATHERINE OF SIENA SCHOOL 30516 SOUTH COAST HIGHWAY LAGUNA BEACH,CA 92651		PC	UNRESTRICTED GRANT	10,000
ST DUNSTAN'S EPISCOPAL CHURCH 18 SPRINGDALE AVENUE DOVER,MA 02030		PC	RESTRICTED GRANT	2,500
ST FRANCIS CHAPEL 800 BOYLSTON STREET BOSTON,MA 02199		PC	UNRESTRICTED GRANT	5,000
ST JOSEPH'S PARISH 1382 HIGHLAND AVENUE NEEDHAM,MA 024922694		PC	RESTRICTED GRANT	2,500
ST JOSEPH'S PARISH 1382 HIGHLAND AVENUE NEEDHAM,MA 024922694		PC	UNRESTRICTED GRANT	10,000
ST SEBASTIAN'S SCHOOL 1191 GREENDALE AVENUE NEEDHAM,MA 02492		SO1	UNRESTRICTED GRANT	20,000
ST VINCENT MEALS ON WHEELS 2131 WEST THIRD STREET LOS ANGELES, CA 90057		PC	UNRESTRICTED GRANT	10,000
THE BRENT SHAPIRO FOUNDATION 10250 CONSTELLATION BOULEVARD 18TH FLOOR LOS ANGELES, CA 90067		PC	UNRESTRICTED GRANT	5,000
THE BRENT SHAPIRO FOUNDATION 10250 CONSTELLATION BOULEVARD 18TH FLOOR LOS ANGELES, CA 90067		PC	UNRESTRICTED GRANT	5,000
THE CATHOLIC APPEAL ARCHDIOCESAN PASTORAL CENTER BRAINTREE,MA 02184		PC	UNRESTRICTED GRANT	5,000
UCLA HEALTH SCIENCES DEPARTMENT DIVISION OF GERIATRICS LOS ANGELES, CA 90095		PC	RESTRICTED GRANT	50,000
UCLA UNICAMP 900 HILGARD AVENUE LOS ANGELES, CA 90024		PC	UNRESTRICTED GRANT	1,500
UNIVERSITY OF CALIFORNIA - IRVINE 101 ACADEMY WAY IRVINE,CA 92617		PC	RESTRICTED GRANT	5,000
UNIVERSITY OF MIAMI SCHOOL OF MEDICINE DIABETES RESEARCH INSTITUTE MIAMI,FL 33136		PC	RESEARCH GRANT	185,540
UNIVERSITY OF SOUTHERN CALIFORNIA USC ATHLETICS HERITAGE HALL LOS ANGELES, CA 90089		PC	RESTRICTED GRANT	1,000
Total			▶ 3a	916,209

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
UNIVERSITY OF SOUTHERN CALIFORNIA USC ATHLETICS HERITAGE HALL LOS ANGELES,CA 90089		PC	UNRESTRICTED GRANT	1,000
VALPARAISO UNIVERSITY SCHOOL OF LAW 656 S GREENWICH STREET VALPARAISO,IN 46383		PC	RESTRICTED GRANT	1,500
VANDERBILT UNIVERSITY MEDICAL CENTER 1400 18TH AVE SOUTH NASHVILLE,TN 372122809		PC	RESEARCH GRANT	232,307
WAKE FOREST UNIVERSITY PO BOX 7227 WINSTONSALEM,NC 27109		PC	UNRESTRICTED GRANT	1,000
WOMEN'S GUILD -CEDARS-SINAI MEDICAL CENTE 5670 WILSHIRE BLVD SUITE 830 LOS ANGELES,CA 90048		PC	RESTRICTED GRANT	10,000
YELLOWSTONE RECOVERY 154 E BAY STREET COSTA MESA,CA 92627		PC	UNRESTRICTED GRANT	2,000
ZENO MOUNTAIN FARM 950 ZENO ROAD LINCOLN,VT 05443		PC	UNRESTRICTED GRANT	6,500
Total				916,209

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As Filed Data -

DLN: 93491210004015

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OMB No 1545-0047

## Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

## **Schedule of Contributors**

Attach to Form 990, 990-EZ, or 990-PF.
 Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

2014

**Employer identification number** 

IACOC	CCA FAMILY FOUNDA	TION	38-6071154				
Organ	ization type (check one	e)					
Filers	of:	Section:					
Form 9	90 or 990-EZ	501(c)( ) (enter number) organization					
		4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation					
		527 political organization					
Form 9	90-PF	501(c)(3) exempt private foundation					
		4947(a)(1) nonexempt charitable trust treated as a private foundation					
		501(c)(3) taxable private foundation					
Gener	<b>al Rule</b> For an organization filin	(8), or (10) organization can check boxes for both the General Rule and a Sp g Form 990, 990-EZ, or 990-PF that received, during the year, contributions to y one contributor Complete Parts I and II See instructions for determining a co	staling \$5,000 or more (in money or				
Specia	al Rules						
Γ	under sections 509(a)( received from any one	cribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 <sup>1</sup> /3% support of 10 and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part contributor, during the year, total contributions of the greater of <b>(1)</b> \$5,000 or form 990-EZ, line 1 Complete Parts I and II	II, line 13, 16a, or 16b, and that				
Γ	during the year, total co	cribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that receive intributions of more than \$1,000 exclusively for religious, charitable, scientific, uelty to children or animals. Complete Parts I, II, and III					
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusive religious, charitable, etc., contributions totaling \$5,000 or more during the year							

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization
IACOCCA FAMILY FOUNDATION

Employer identification number 38-6071154

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed	•	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	IACOCCA CLUT FBO ARIANNA ASSAD C/O WILMINGTON TRUST LOS ANGELES, CA 90067	\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	SPORTS ZONE INC 108 MARGO LANE FAYETTVILLE, NY 13066	\$9,750	Person Payroll Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	THOMAS J SMACH REV TRUST 4504 SPRUCE RIDGE DRIVE  MANLIUS, NY 13104	\$ <u>8,750</u>	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Name of organization
IACOCCA FAMILY FOUNDATION

Benchmark
38-6071154

	45.3	(c)	
ko. m	(b)	FMV (or estimate)	(d)
ii   t i	Description of noncash property given	(see instructions)	Date received
		/	
lo. n t I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-		<u> </u>	
  bo.  m  t	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		(see instructions)	
lo. m t I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<u> </u>	
lo. m t I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<u> </u>	
lo. m t I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Schedule	B (Form 990, 990-EZ, or 990-PF) (2014)			Page 4
	organization			Employer identification number
IACOCCA	A FAMILY FOUNDATION			38-6071154
Part III		om any one r the total of e uctions)	contributor. Complet	cribed in section 501(c)(7), (8), or (10) e columns (a) through (e) and the following line charitable, etc., contributions of \$1,000 or less for \$
(a) No. from Part I	from (b) Purpose of gift		Use of gift	(d) Description of how gift is held
	Transferee's name, address, and Z		Transfer of gift Relatio	onship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c)	Use of gift	(d) Description of how gift is held
	Transferee's name, address, and Z		Transfer of gift Relatio	onship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c)	Use of gift	(d) Description of how gift is held
	Transferee's name, address, and Z		Transfer of gift Relatio	onship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c)	Use of gift	(d) Description of how gift is held
	Transferee's name, address, and Z		Transfer of gift Relatio	onship of transferor to transferee

# **TY 2014 Accounting Fees Schedule**

Name: IACOCCA FAMILY FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING	39,391	8,948		30,443

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# **TY 2014 Investments Corporate Stock Schedule**

Name: IACOCCA FAMILY FOUNDATION

Name of Stock	End of Year Book Value	End of Year Fair Market Value
PUBLICLY TRADED SECURITIES	837,203	837,203

### **TY 2014 Investments - Other Schedule**

Name: IACOCCA FAMILY FOUNDATION

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
MUTUAL FUNDS	FMV	35,393,207	35,393,207
CASH HELD FOR INVESTMENTS	FMV	646,766	646,766
KINETA INVESTMENT LOAN	FMV	500,000	500,000

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# TY 2014 Land, Etc. Schedule

Name: IACOCCA FAMILY FOUNDATION

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
EQUIPMENT	72,901	51,843	21,058	21,058

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# TY 2014 Legal Fees Schedule

Name: IACOCCA FAMILY FOUNDATION

	Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEG	SAL	10,058	0		10,058

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### **TY 2014 Other Assets Schedule**

Name: IACOCCA FAMILY FOUNDATION

	Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
CS'	V LIFE INSURANCE POLICY	1,996,508	2,051,477	2,051,477



### **TY 2014 Other Decreases Schedule**

Name: IACOCCA FAMILY FOUNDATION

Description	Amount
UNREALIZED LOSS	820,327

DLN: 93491210004015

# **TY 2014 Other Expenses Schedule**

Name: IACOCCA FAMILY FOUNDATION

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
SUPPLIES	7,468	747		6,721
TELEPHONE	9,557	956		8,601
POSTAGE, SHIPPING & DELIVERY	3,072	307		2,765
INSURANCE	42,113	4,211		37,902
OUTSIDE COMPUTER SERVICES	1,775	178		1,597
PAYROLL PROCESSING FEES	2,838	284		2,554
STORAGE	2,160	0		2,160
MISCELLANEOUS	8,138	361		7,738
MEMBERSHIP DUES	5,800	0		5,800
BAD DEBT	21,294	0		0

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#### **TY 2014 Other Professional Fees Schedule**

Name: IACOCCA FAMILY FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OTHER	20,764	166		20,598
INVESTMENT	58	58		0

### **TY 2014 Taxes Schedule**

Name: IACOCCA FAMILY FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PAYROLL TAXES	21,798	2,058		19,740
EXCISE TAX	25,000	0		0